INFORMATION DISCLOSURE STATEMENT BY APPLICANT

Complete if Known	
Application Number	TBA
Filing Date	
First Named Inventor	Barone, David D.
Group Art Unit	TBA
Examiner Name	TBA
Attorney Docket Number	P1830 US

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U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.	U.S. Patent Document Number	Kind Code	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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/T.M./		WO	01/10346	A1	B. Braun Medical	02-15-2001		

Examiner Signature	/Thomas Mcevoy/	Date Considered	09/13/2007

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